

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	5557-8
First Named Inventor	Cesar
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BATTING SWING TRAINER AND METHOD

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 368(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(b) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					

[Page 1 of 2]

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number _____ OR Correspondence address below

Name LAFF, WHITESEL & SARET, LTD.

Address 401 North Michigan Avenue - Suite 1700

City Chicago State IL ZIP 60611

Country US Telephone (312)661-2100 Fax (312)661-0029

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor

Given Name John G. Family Name Cesar
(first and middle [if any])

Inventor's Signature  Date 6/14/01

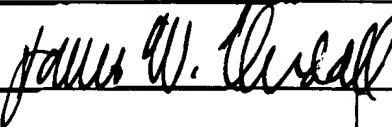
Residence: City Justice State IL Country US Citizenship US

Mailing Address 7750 Archer Road

City Justice State IL ZIP 60458 Country US

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name James W. Family Name Kendall
(first and middle [if any])

Inventor's Signature  Date 6/14/01

Residence: City Mt. Prospect State IL Country US Citizenship US

Mailing Address 203 W. Hiawatha Trail

City Mt. Prospect State IL ZIP 60056 Country US

Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Scott A.		Massing	
Inventor's Signature			Date <u>6-14-01</u>
Residence: City	Chicago	State	IL
Country	US	Citizenship US	
Mailing Address <u>2752 N. Mildred, Apt. #2</u>			
Mailing Address <u>same as above</u>			
City	Chicago	State	IL
ZIP	60614	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
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City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	Herewith
First Named Inventor	Ciavar
Title	BATTING SWING TRAINER AND METHOD
Group Art Unit	
Examiner Name	
Attorney Docket Number	5557-8

I hereby appoint:

Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

OR

Practitioner(s) named below:

Name	Registration Number
Charles A. Laff	19787
J. Warren Whitesel	16830
Larry L. Saret	27674
Martin L. Stern	28911

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Firm or
Individual Name

LAFF, WHITESEL & SARET, LTD.

Address

401 North Michigan Avenue

Address

Suite 1700

City

Chicago

State

IL

Zip

60611

Country

US

Telephone

(312)661-2100

Fax

(312)661-0029

I am the:

Applicant/Inventor.

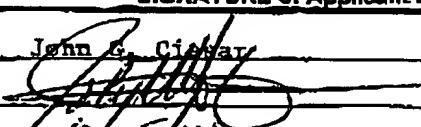
Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

John C. Ciavar

Signature



Date

6/1/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 2 forms are submitted.

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Power Of Attorney Or Authorization Of Agent - PTO/SB/81(02-01)

Supplemental List - Additional Practitioners

Louis Altman	(Reg. No. 19,373)
Barry W. Sufrin	(Reg. No. 27,398)
Marshall W. Sutker	(Reg. No. 19,995)
Kevin C. Trock	(Reg. No. 37,745)
William A Meunier	(Reg. No. 41,193)
Lisa C. Childs	(Reg. No. 39,937)
Catherine J. Wright-Mitchell	(Reg. No. 47,187)
David R. Price	(Reg. No. 31,557)
John C. Bigler	(Reg. No. 29,513)
Glenn M. Massina	(Reg. No. 40,081)
Leon Nigohosian, Jr.	(Reg. No. 39,791)
Donald W. Walk	(Reg. No. 29,118)
Christopher B. Austin	(Reg. No. 41,592)
David L. De Bruin	(Reg. No. 35,489)
Gerald L. Fellows	(Reg. No. 36,133)
Joseph A. Gemignani	(Reg. No. 19,482)
Gregory J. Hartwig	(Reg. No. 46,761),
Daniel S. Jones	(Reg. No. 42,697)
Richard L. Kaiser	(Reg. No. 46,158)
Timothy M. Kelley	(Reg. No. 34,201)
Casimir F. Laska	(Reg. No. 30,862),
Edward R. Lawson Jr.	(Reg. No. 41,931)
Craig J. Loest	(Reg. No. P-48,557)
Richard H. Marschall	(Reg. No. 39,290),
Thomas A. Miller	(Reg. No. 36,871),
Kevin P. Moran	(Reg. No. 37,193),
Thomas J. Otterlee	(Reg. No. P-48,652)
Thomas S. Reynolds II	(Reg. No. 45,262),
Raye L. Shaffer	(Reg. No. 47,933),
Chad W. Shea	(Reg. No. P-48,470)
David B. Smith	(Reg. No. 27,595)
Derek C. Stettner	(Reg. No. 37,945)
Billie Jean Strandt	(Reg. No. 36,940)
Glen A. Weitzer	(Reg. No. P-48,337)
Sheldon L. Wolfe	(Reg. No. 43,996)
Paul F. Donovan	(Reg. No. 39,962)
Jill A. Fahrlander	(Reg. No. 42,518)
Grady J. Frenchick	(Reg. No. 29,018),
Jeffrey D. Peterson	(Reg. No. P-49,038)
Sara Vinarov	(Reg. No. P-48,524)